## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

	FOR LINE NUMBER:						PAGE		6	OF	8
(check only one)											
		×	11a		11b		11c		12	2	
			13		14		15		16	6	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Political and Legislative Organization on Watch Comm - Seafarers Int'l Union of NA-AGLIWD Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Oliveira, Manuel, A,, Date of Receipt Mailing Address 440 NE 4th Avenue Unit 121 2016 City Zip Code State Transaction ID: 11704344 FL Fort Lauderdale 33301 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Retired Pension Merchant seaman Receipt For: Aggregate Year-to-Date ▼ Primary General 220.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Oliveira, Manuel, A,, Date of Receipt Mailing Address 440 NE 4th Avenue Unit 121 2016 City State Zip Code Transaction ID: 11704537 FL Fort Lauderdale 33301 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Retired Pension Merchant seaman Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 240.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 40.00 SUBTOTAL of Receipts This Page (optional)..... 40.00 TOTAL This Period (last page this line number only).....